



COVID-19 Vaccine Implementation Collaborative

Land Acknowledgment

Welcome to the Washington State Department of Health. We start today with a land acknowledgement. We are meeting virtually from all over, but our physical offices are located in Tumwater, on the traditional territories of the Coast Salish people, specifically the Nisqually and Squaxin Island peoples. Tumwater and the South Puget Sound region are covered by the Treaty of Medicine Creek, signed under duress in 1854. The employees of the State of Washington are guided by the **Centennial Accord and chapter 43.376 RCW** – respecting and affirming tribal sovereignty and working with our tribal governments throughout the state in government-to-government partnership.

<https://native-land.ca/>

Today's Agenda

1. **Welcome from Secretary of Health** 4:05-4:15
2. **Setting and holding space** 4:15-4:35
3. **Collaborative Conversation** 4:35-4:50
4. **Community Relations Briefing & Conversation** 4:50- 5:25
5. **Closing Remarks** 5:25 - 5:30

Commitment and Values

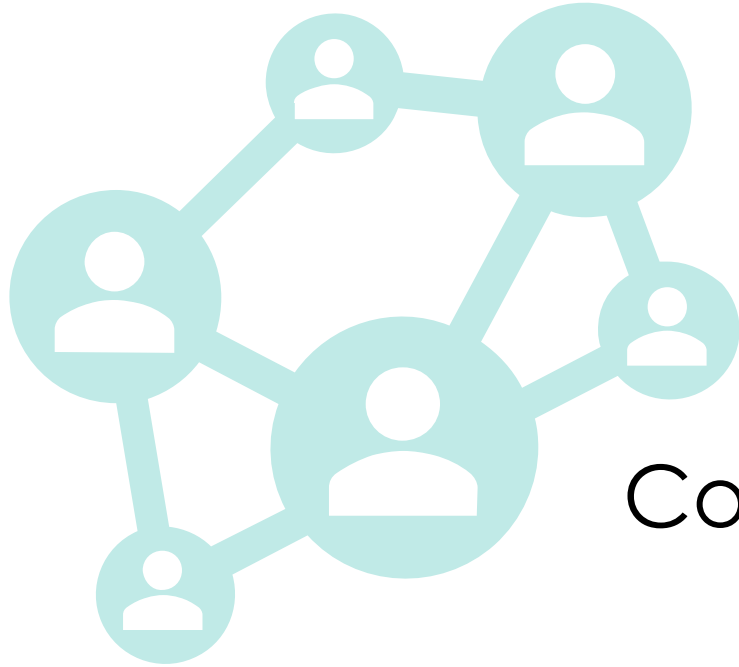
We are committed to equity and social justice and recognize COVID-19 does not impact all communities equally. This Collaborative will intentionally prioritize the needs, requests, feedback, recommendations, and participation from communities and sectors most impacted by COVID-19. **Participants who are unable to uphold these values will be asked to leave.**

Community Agreements

- Transparency
- Respect
- Take space, make space
- Grace
- Confidentiality
- Take care of yourselves and others

... What else?





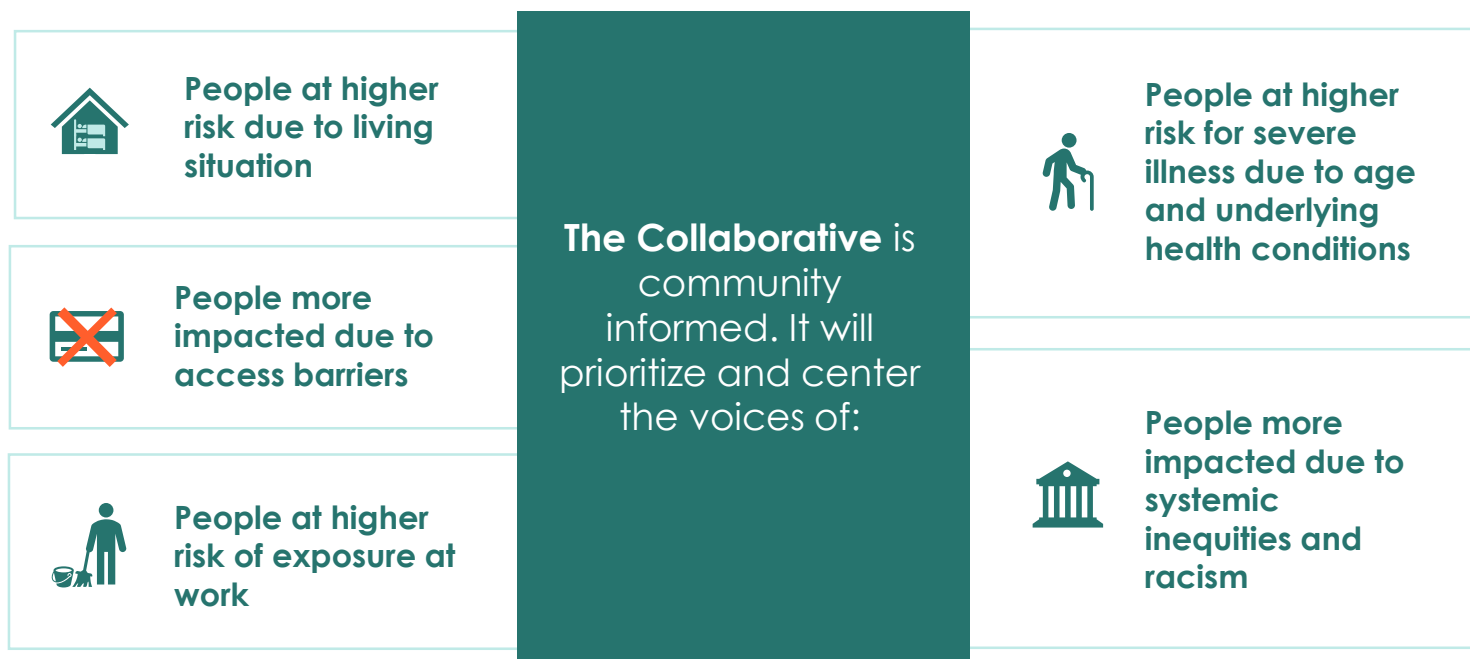
Collaborative Conversation

Equity and Engagement

1. Engaging communities to inform all vaccine efforts
2. Ensuring all communications, education, and outreach efforts are culturally and linguistically appropriate and accessible
3. Strengthening the public health system's ability to center communities in vaccine outreach and access
4. Fostering opportunities for collaboration
5. Investing in trusted community leaders, messengers, and organizations
6. Supporting a trauma-informed approach to vaccine conversations

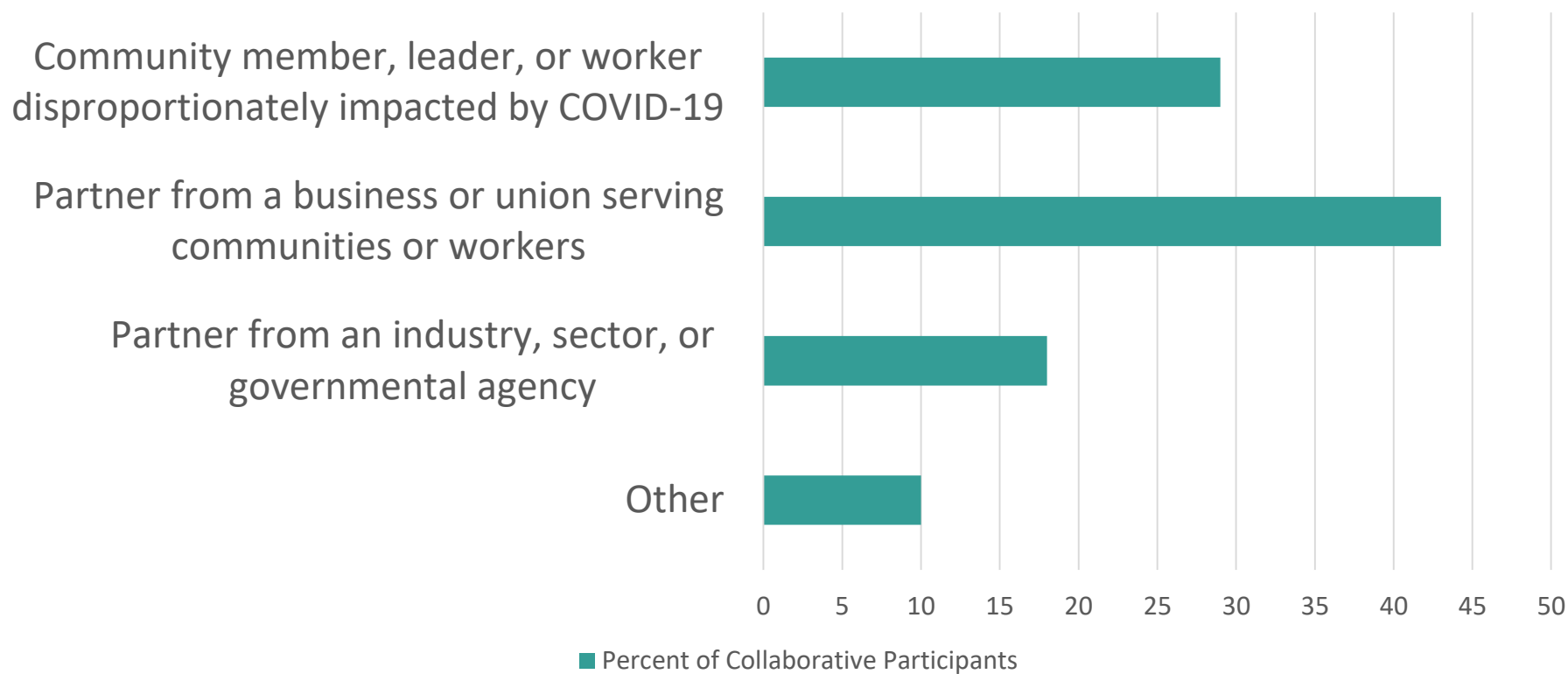
What is the Collaborative?

A space to ensure equity and social justice in vaccine planning and implementation through collaboration that prioritizes **those most impacted by COVID-19**



Who makes up the Collaborative?

Percent of Collaborative Participants



*Helping to reduce
fear and
misinformation that
keeps people from
getting vaccines*

*We want to center our
community efforts in the
vaccine roll-out so that it
is culturally responsive
and respectful of our
community protocols and
cultural values and
traditions*

*My community looks to
me as a leader in all
things COVID. I want to
use my voice to
advocate for vaccine
safety, efficacy, and
equity*

What is the role of Collaborative members?

- Share vaccine updates and feedback
- Problem-solve vaccine access barriers
- Plan culturally and linguistically appropriate outreach
- Collaborate with others to support equitable distribution of vaccine



Themes

- ◉ Leading with Equity
- ◉ Vaccine Prioritization & Allocation
- ◉ Supply & Distribution
- ◉ Misinformation
- ◉ Vaccine Hesitancy
- ◉ Community Driven Messages
- ◉ Collaboration and Partnerships

Community Relations Briefing and Conversation

Recommendation: Equity as a cross-cutting factor

People with access barriers to health care: People with limited transportation, people with limited English proficiency, individuals with disabilities, people without health insurance, undocumented people

People at higher risk for exposure: Farm and factory workers, essential workers, people who live in congregate housing, people experiencing homelessness, people who are incarcerated or detained, people in workplaces with outbreaks

People essential to health and wellbeing of populations at higher risk: Doulas, caregivers (both formal and informal), home care aides, health care interpreters, community and mutual aid volunteers, community health workers

People who live in areas with greater spread: Geographic hotspots and outbreaks, congregate housing with outbreaks

People who have been disproportionately impacted by COVID-19 because of systemic inequities: Communities of color, people with limited English proficiency, individuals with disabilities, low-income people

People at risk for severe illness: Older adults and elders, pregnant people, people with underlying medical conditions that put them at a higher risk for severe morbidity or mortality if infected with COVID-19

People who are at higher risk for spreading COVID-19 to high risk populations: Caregivers, people living in multi-generational households, children and youth, essential workers, people who must travel for work

WASHINGTON'S COVID-19 VACCINE PHASES

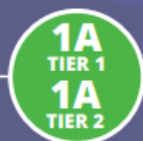
Phase 1 Estimated Start Dates (Tiers A and B)

Find out if it's your turn at **FindYourPhaseWA.org**

WINTER

SPRING / SUMMER

SUMMER / FALL



- High-risk healthcare workers in health care settings
- High-risk first responders
- Long-term care facility residents
- All other workers at risk in health care settings



- All people **65 years or older**
- All people **50 years or older** in multigenerational households (home where individuals from 2 or more generations reside such as an elder and a grandchild)



- High-risk critical workers **50 years or older** who work in certain congregate settings: Agriculture; food processing; grocery stores; K-12 (educators & staff); childcare; corrections; prisons, jails or detention centers; public transit; fire; law enforcement



- People **16 years or older** with 2 or more co-morbidities or underlying conditions



- High-risk critical workers **under 50 years** who work in certain congregate settings (as noted in B2)
- People, staff, and volunteers in congregate living settings: Correctional facilities; group homes for people with disabilities; people experiencing homelessness that live in or access services in congregate settings



- Information on who is eligible for Phases 2, 3 & 4 coming soon.

FOCUS ON EQUITY: This approach prioritizes population groups that have been disproportionately impacted by COVID-19 due to external social factors and systemic inequities.

The timelines represented here are estimates and subject to change.

**Vaccinate
WA** 

CovidVaccineWA.org

1a Groups: Who is included

- Workers in health care settings
- This definition includes home-based health care services. We recognize health care happens in different settings.
- Eligibility is about role & risk **not** title
- Included:
 - Community health workers (in contact with patients, potential COVID-19 exposure)
 - Health care interpreters (non-remote)
 - Home care aides
 - Doulas, midwives, birth workers
 - Volunteers, employees, contractors in different health care settings

<https://www.doh.wa.gov/Emergencies/COVID19/VaccineInformation/AllocationandPrioritization>

Q WHAT DOES MULTIGENERATIONAL HOUSEHOLD MEAN?

A household where individuals from 2 or more generations live such as an elder and a grandchild.

ELIGIBLE WITHIN THE DEFINITION OF MULTIGENERATIONAL HOUSEHOLD:

A person over 50 who:

- Cannot live independently and receives long-term care from a relative, caregiver (paid or unpaid), or someone who works outside the home
- Lives with and cares for a young child like grandparent/grandchild

NOT ELIGIBLE IN THIS PHASE:

- Someone younger than 50
- Someone over 50 who cares for a partner or friend
- Any parent or guardian caring for their small child or teen

Getting an appointment

1. Visit our [Phase Finder web form](#).
2. View a list of [vaccine locations](#).



Thank you First name Last
name. You are eligible to get the
COVID-19 vaccine now.

Please take a screenshot or print off this confirmation message and show it to your
vaccine provider. Please visit
<https://www.doh.wa.gov/YouandYourFamily/Immunization/VaccineLocations> to
identify a vaccine provider near you.

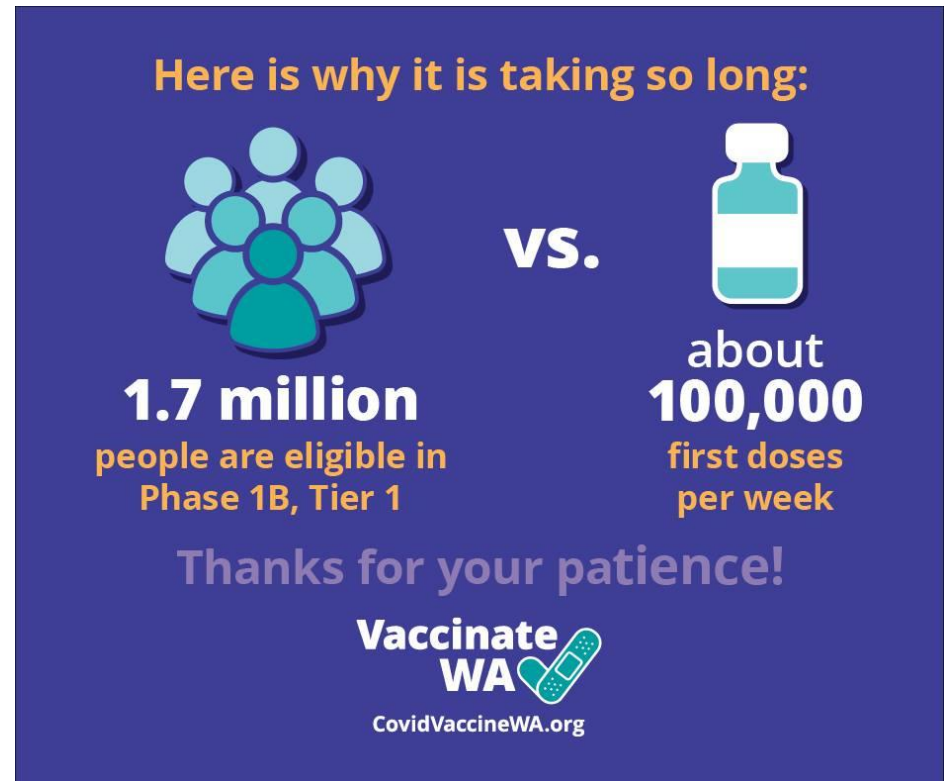
1. Dial 1-800-525-0127, then press #. Language assistance is available. The hotline will complete Phase Finder and will provide contact information for vaccine sites.
2. Ask for the hotline to add your cell phone to PhaseFinder if you have text messaging.
3. Call the sites to get an appointment.
4. At the appointment, tell the vaccine provider that 211 (or the COVID-19 hotline) confirmed your eligibility.

Washington Plan for Increased Vaccinations

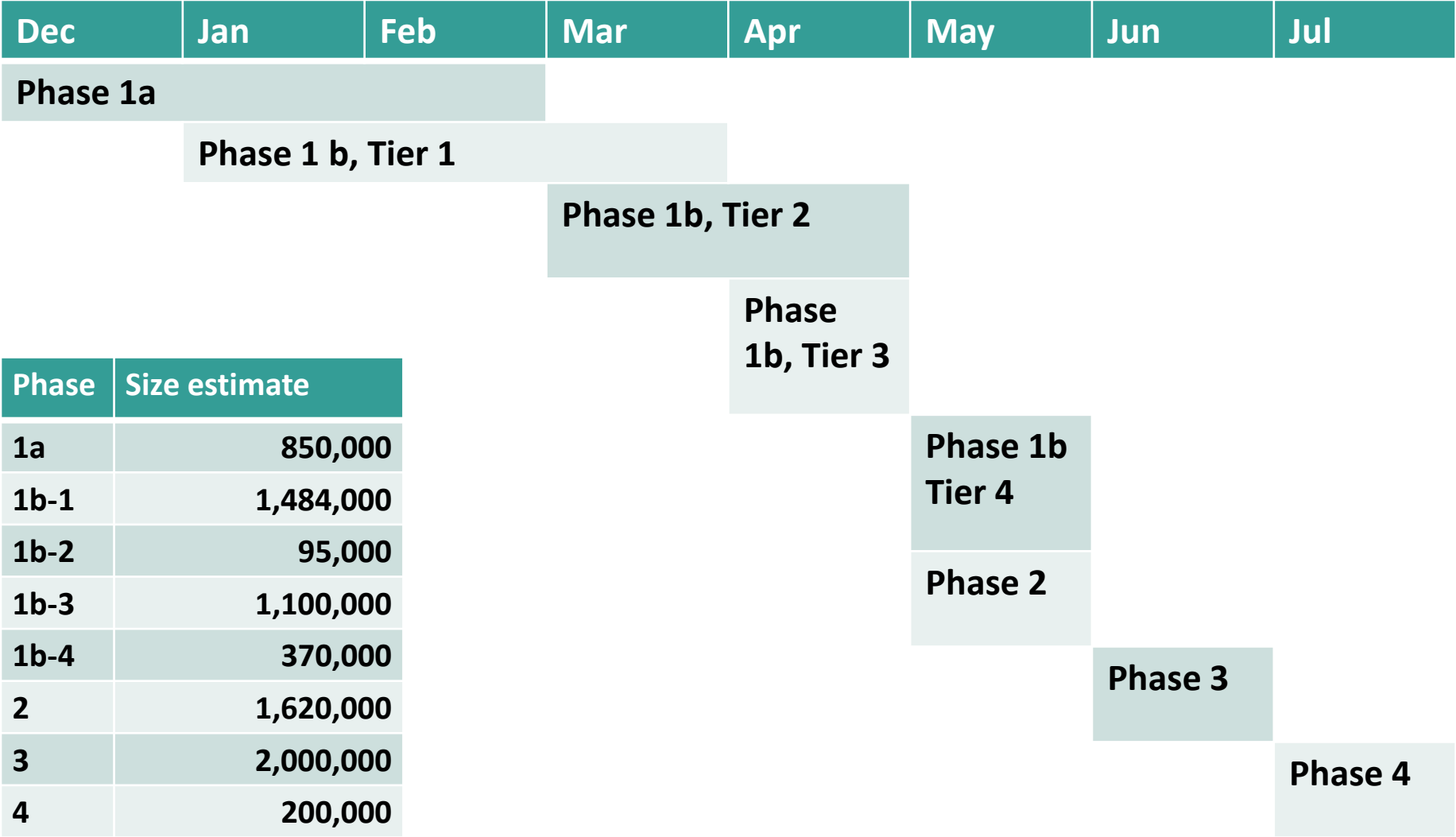
1. Healthcare systems
2. Pharmacies
3. Employer-based clinics
4. State mass vaccination sites
5. Community vaccination sites
6. Mobile teams
7. Community-based pop-ups

Mass Vaccination Clinics in:

- Benton-Franklin
- Chelan
- Clark
- Spokane



WA State COVID-19 Best Guess Supply & Phase Projections



Cost

Will you have to pay for the vaccine?

No. You should not be asked to pay or receive a bill for the vaccine. This is true for people who have private insurance, Medicaid, Medicare, or are uninsured.

- If you have health insurance and you get a bill for the vaccine:
 - Contact your health insurance plan.
 - [File a complaint](#) with the Office of the Insurance Commissioner.
- If you do not have health insurance and you get a bill for the vaccine:
 - Email covid.vaccine@doh.wa.gov. Providers are not allowed to charge you for the vaccine.



COVID-19 VACCINE IS PROVIDED AT NO COST.

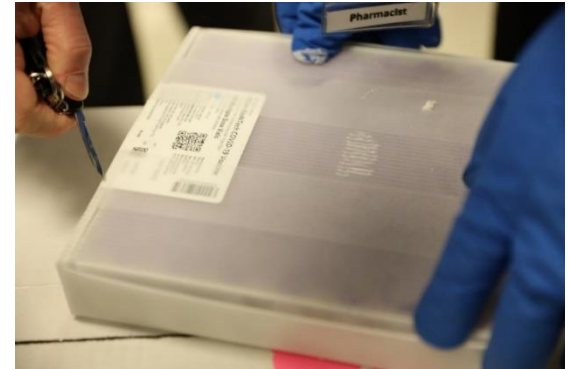
The federal government will cover the cost of your vaccine.

You should not be charged an administration fee. Also, your provider should not charge or bill you if you only go in to get vaccinated.

Vaccinate WA
CovidVaccineWA.org

Challenges

- Limited vaccine supply
 - Balancing supply vs. demand
- Standing up large scale clinics
 - Logistics/personnel
- Communications/engagement
 - Amplify message/voice
- Disparate data systems/data lags
 - Technology solutions
- Stretched public health and healthcare systems
 - Capacity constraints
- Reaching communities with inequities from COVID disease
 - Building trust
- Ensuring equitable access
 - Addressing access barriers



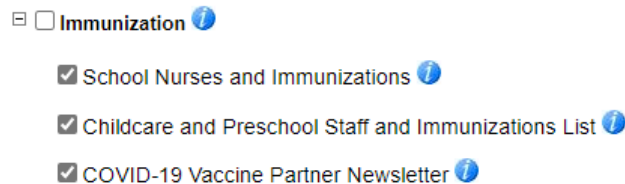
Unboxing the very first shipment of COVID-19 vaccine to arrive in Washington state

COVID-19 Vaccine Newsletter

- The COVID-19 Vaccine Newsletter is a topic people can subscribe to on GovDelivery.
- People can manage their subscriptions by going to the following [link](#).
 - From there, click on ‘add subscriptions’ at the bottom of the page.

Add Subscriptions

- On the next page, expand the ‘Immunizations’ tab and check the box for “COVID-19 Vaccine Partner Newsletter.”



- COVID Vaccine webpage
 - <https://www.doh.wa.gov/Emergencies/COVID19/Vaccine>
- [Mass vaccination sites](#)
- [Phase Finder](#)
- [Vaccine locations webpage](#)
- Provider Resource Page (Enrollment & Toolkit)
 - <https://www.doh.wa.gov/Emergencies/COVID19/HealthcareProviders/VaccineInformationforHealthcareProviders>
- [Translated materials](#)
- Detailed documents on Phase 1B [posted](#)
 - [Summary guidance for Phases 1A and 1B \(PDF\)](#) Updated January 7, 2021
 - [Washington state's interim vaccine allocation and prioritization guidance \(PDF\)](#) Updated January 7, 2021
- Equity and engagement efforts
 - <https://www.doh.wa.gov/Emergencies/COVID19/VaccineInformation/Engagement>
- COVID-19 Vaccine Inbox:
 - COVID.Vaccine@doh.wa.gov



Closing Thoughts

For more information visit the DOH webpage:

[https://www.doh.wa.gov/Emergencies/COVID19/VaccineInformation/Engagement/
Collaborative](https://www.doh.wa.gov/Emergencies/COVID19/VaccineInformation/Engagement/Collaborative)

For questions contact:

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Passia Abraham, Community Outreach Consultant Passia.Abraham@doh.wa.gov



To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov.



Template Letter

[INSERT DATE]

Dear COVID-19 Vaccination Provider,

This letter verifies that the bearer, [INSERT EMPLOYEE NAME], is employed by [INSERT EMPLOYER/COMPANY NAME] and is phase 1A eligible for COVID-19 vaccine based on Washington State Department of Health COVID-19 Vaccine Allocation Guidance for Phase 1A, available at <https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/SummaryInterimVaccineAllocationPrioritization.pdf>.

Phase 1A eligible groups for COVID-19 vaccine (employer to mark staff eligible group):

Tier 1

- ☐ High-risk workers in healthcare settings, including first responders, who are at high risk of acquisition given setting and nature of work
- ☐ Workers with elevated risk of acquisition/transmission with populations at higher risk of mortality or severe morbidity

Tier 2 (After completion of Tier 1)

- ☐ All other workers at risk in health care settings who are at risk of acquisition or transmission of COVID because they are interacting in close proximity with patients, co-workers, or specimens and are unable to remain socially distant

Please use this letter and identification card as verification of eligibility and offer COVID-19 vaccination.

Getting Vaccinated for COVID-19



Fighting the pandemic has been hard, but now we have two vaccines to protect us from COVID-19.



Both vaccines are provided at no cost.

The federal government will cover the cost of your vaccine. Providers may charge you a fee to give the vaccine, but health insurance will likely cover it. Providers will waive the fee if you can't afford it.



You will need to get two doses.

You will get two doses of vaccine, three to four weeks apart.



Both vaccines are safe and effective.

The vaccines are 94 to 95 percent effective. The U.S. Food and Drug Administration (FDA) authorized the vaccines for emergency use and found no serious safety concerns. Independent experts confirmed it met high safety and efficacy standards.



People at highest risk will get the vaccine first.

We do not currently have enough vaccine for everyone. As a result, the Department of Health had to make choices about who will get the vaccine first. The first doses will go to high-risk workers in health care settings and residents and staff of long-term care facilities. Everyone will be able to get vaccinated when we have enough doses.



You may feel side effects.

Like other routine vaccines, you may get a sore arm, fever, headaches, or fatigue after getting vaccinated. These are signs the vaccine is working.

Getting Vaccinated for COVID-19

What vaccines are available?

There are two vaccines available:

1. Pfizer-BioNTech
2. Moderna

Both were approved by the FDA for emergency use. Medical experts on the Advisory Committee for Immunization Practices and the Western States Scientific Safety Review Workgroup confirmed the vaccines met our standards for safety.

Who should get a COVID-19 vaccine?

It is your choice to get the vaccine. If you decide to get it, you should tell your vaccine provider if you:

- Have a history of severe allergic reactions
- Have a fever
- Have a bleeding disorder or take blood thinners
- Are immunocompromised or are on a medicine that affects your immune system
- Are pregnant, plan to become pregnant, or are lactating
- Have received another COVID-19 vaccine

You should not get the vaccine if you have had a serious allergic reaction to a previous dose of the COVID-19 vaccine or to any ingredient in the vaccine.

The vaccines contain the active ingredient, messenger RNA (mRNA), along with fat, salts, and sugars to protect the mRNA and help it work better in the body.

You must be at least 16 years old to get the Pfizer-BioNTech vaccine and 18 years old to get the Moderna vaccine.

What are the side effects?

It is common to have side effects one or three days after getting the vaccine. Common side effects are tiredness, muscle pain, pain in your arm where you got your shot, fever, headache, joint pain, chills, nausea, or vomiting. If your symptoms don't go away, contact your doctor or clinic.

You should wait 15 to 30 minutes before leaving the vaccine site so your vaccine provider can help you if you do have an allergic reaction or other side effects. While you wait, you can sign up for v-safe to report any side effects and get a reminder for your second dose: v-safe.cdc.gov.

You or your vaccine provider can also report side effects to the Vaccine Adverse Event Reporting System (VAERS): vaers.hhs.gov/reportevent.html.

Call 911 if you have an allergic reaction after leaving the clinic. Signs of an allergic reaction include: difficulty breathing, swelling of your face and throat, fast heartbeat, a bad rash all over your body, dizziness, and weakness.

What happens after I get vaccinated?

Make an appointment for your second dose. You'll need to come back in three to four weeks to get your second dose. It will take up to two weeks after your second dose for full protection.

Many people will have to wait months to get vaccinated. After you get the vaccine, keep wearing your mask, stay six feet (two meters) apart, and keep gatherings small to protect those who are not yet vaccinated.

- [Getting Vaccinated \(PDF\)](#)  [Additional languages](#)

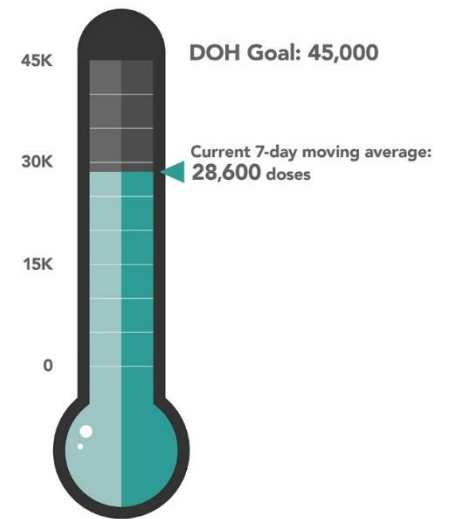
Amharic	Hmong	Portuguese (Brazil)	Tamil
Arabic	Japanese	Punjabi	Telugu
Burmese	Karen	Romanian	Thai
Chinese (Simplified)	Khmer (Cambodian)	Russian	Tigrinya
Chinese (Traditional)	Korean	Samoan	Ukrainian
Farsi	Laotian	Somali	Urdu
French	Marshallese	Spanish	Vietnames
German	Nepali	Swahili	
Hindi	Oromo	Tagalog	

Getting to 45K doses a day



Photo credit: Seattle Times 1/14/2021: Randall Thomas, 71, took this photo as he waited in line for a coronavirus vaccination on Thursday in Sequim, only to be turned away just 10 cars from... (Courtesy of Randall Thomas)

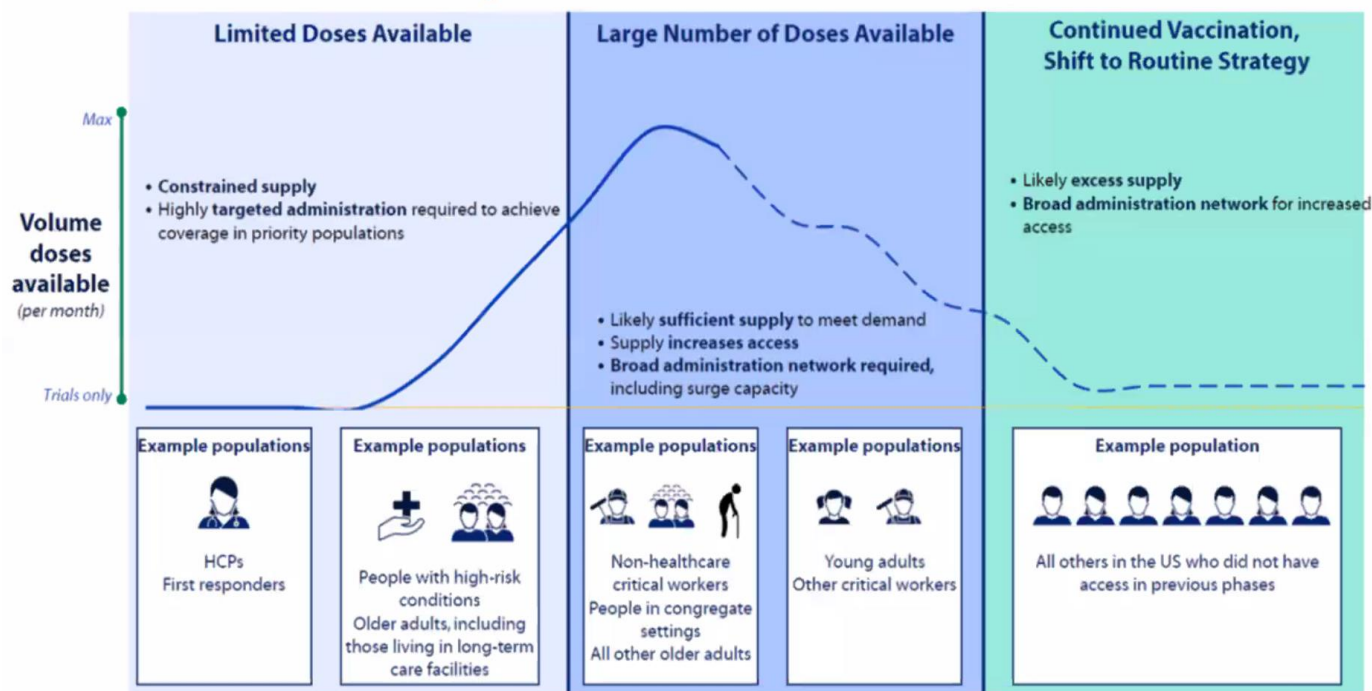
COVID-19 Vaccine Doses Administered Daily

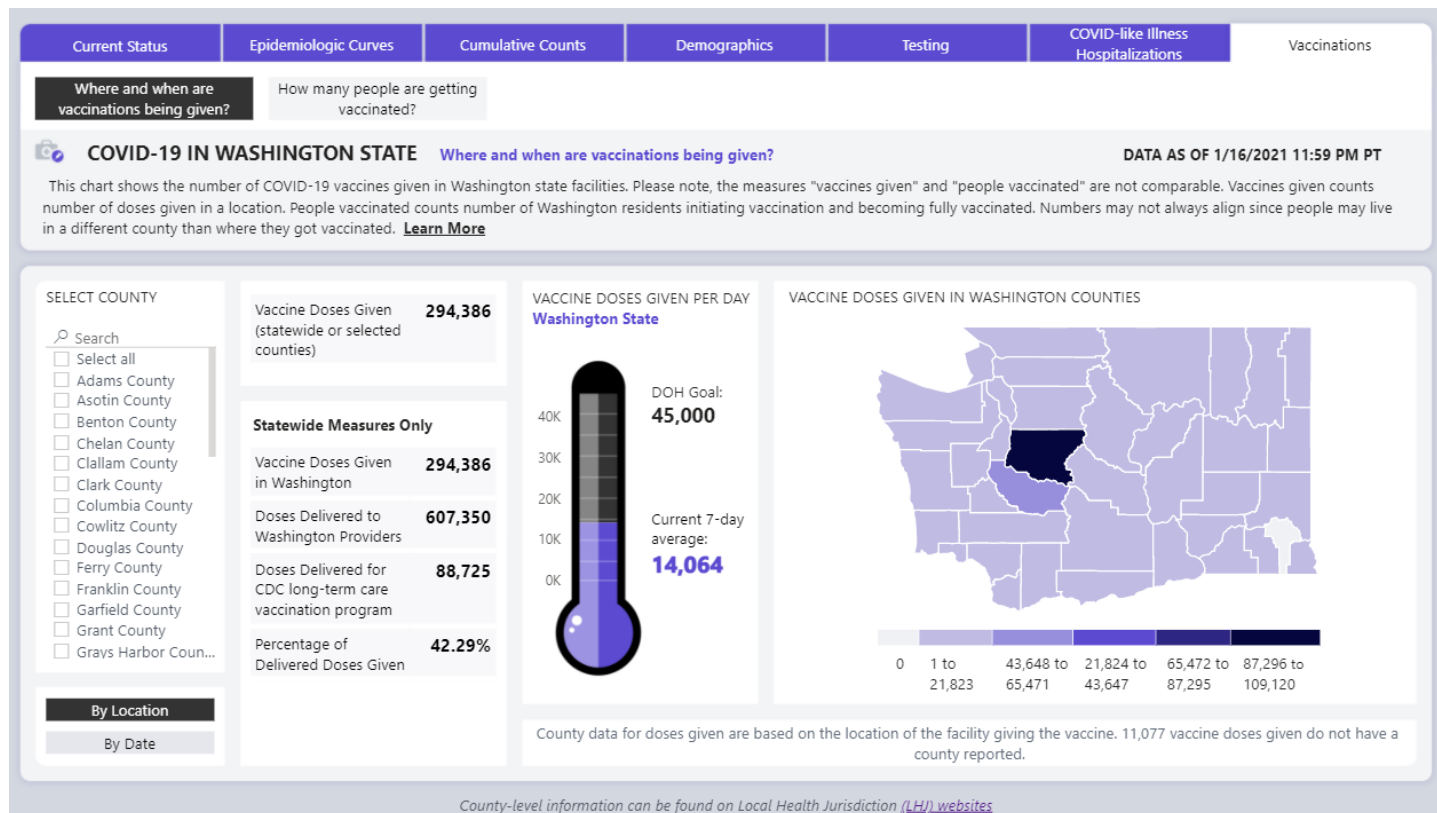


70% of eligible population – 4.3 million
population over 7 months / desire for faster

Vaccine Supply

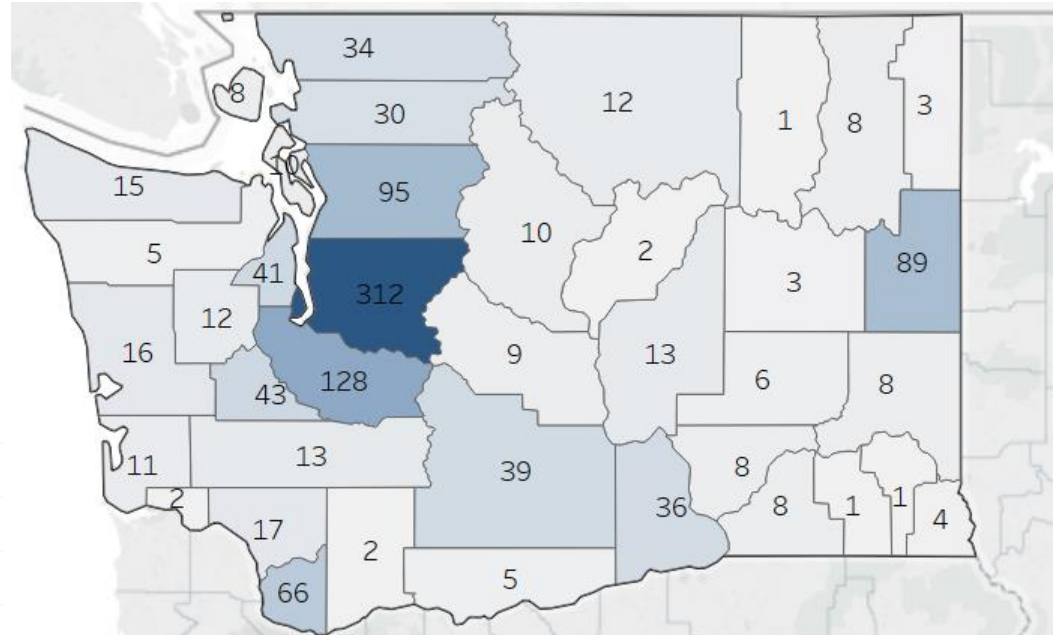
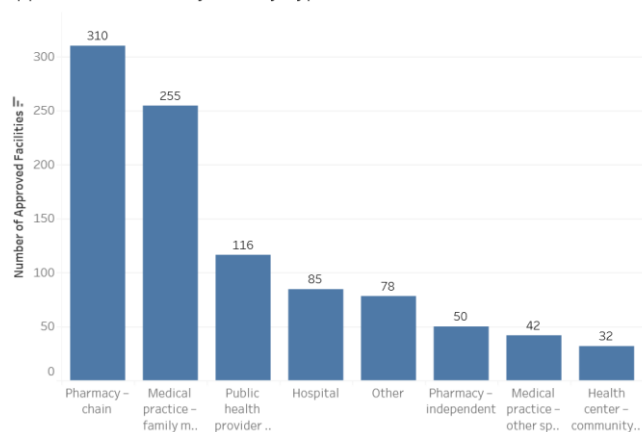
Distribution will adjust as volume of vaccine doses increases



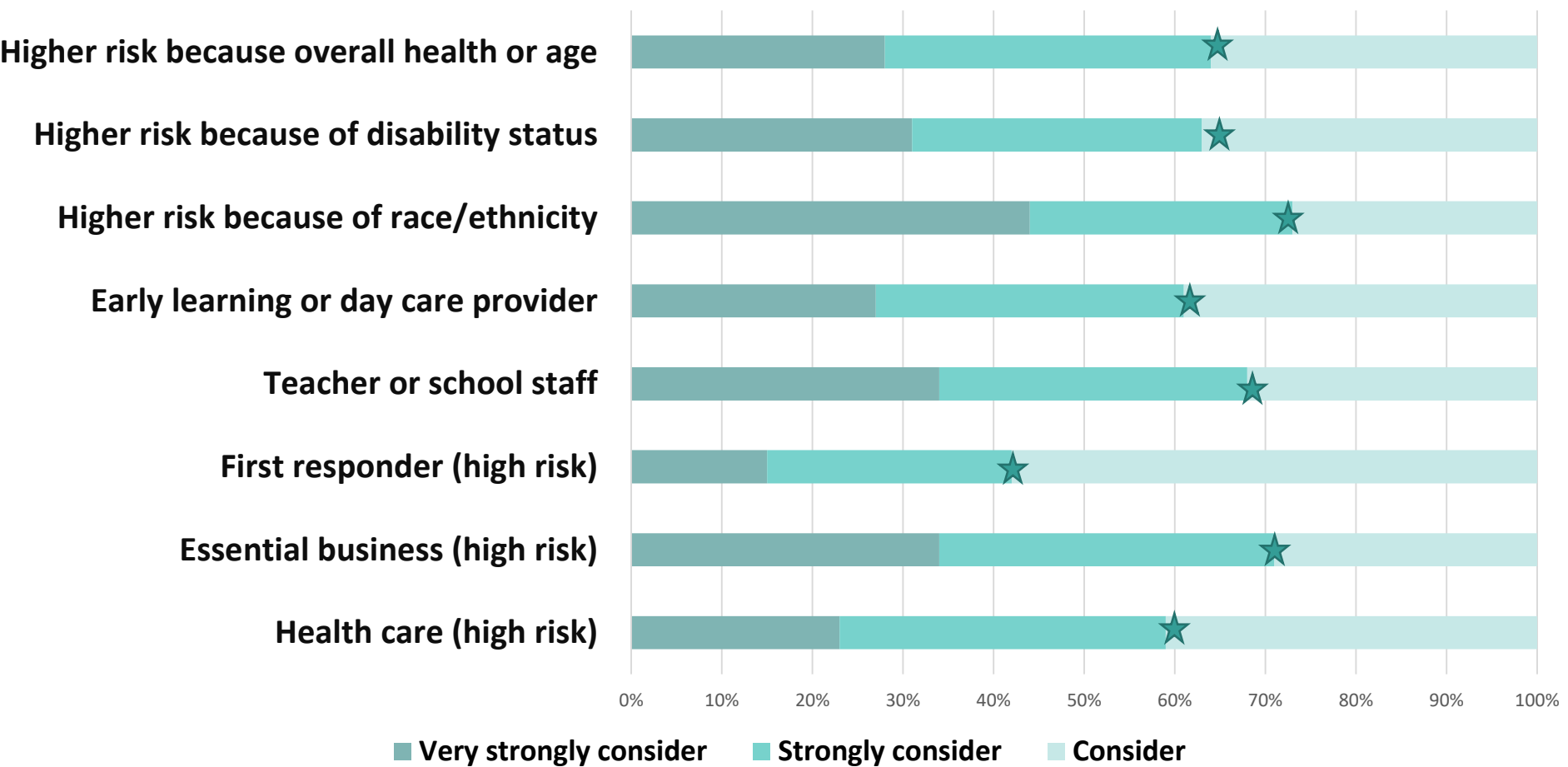


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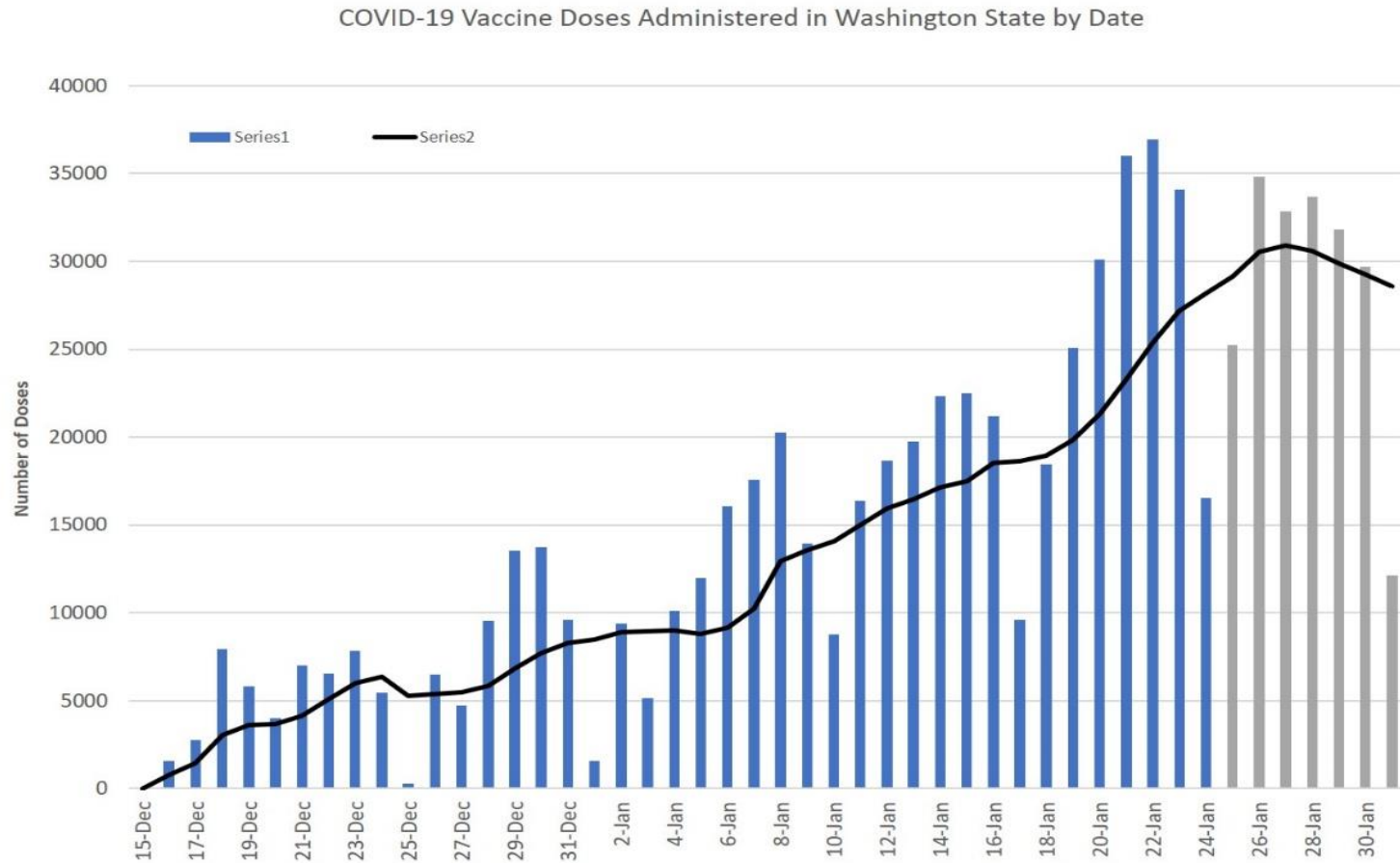
Approved Facilities by Facility Type



Question: How would like us to consider: People who have been disproportionately impacted by COVID-19 because of systemic inequities?



COVID-19 Vaccine Doses Administered by Date



Data source: Washington State Immunization System, reported as of 11:59pm 1/31/2021

Light grey bars represent incomplete data due to reporting lag

Note: Dose administration data reported as of date lags by 2 days to allow for data processing and quality assurance checks.